SUBMIT: COMPLETED APPLICATION, TAX STATEMEN, AND FEE TO: Sayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

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Refund:	Amount Paid:	Date:	Permit #:	TOA IT
	2/23/12 81	8-16-12	18-05ha	TS.00 CU 525.
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INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

				I via con				Commercial Use				Kesidentiai Ose				Proposed Use	1. oposed existing	Existing Structure: (if permit being applied for is relevant to it)	Tippering.				000 G 1 1 c	(000000000000000000000000000000000000000	Value at Time of Completion * include donated time & material	□ Non-Shoreland	K Shoreland → □ I	T	Section / S) J~	_	PROJECT LOCATION	Authorized Agent: (Person)	Contractor:	Muskey Rd	Address of Property:	
□ Ot	Co	□ Sp	Ac	<u> </u>	-	-								+	□ Pri	\ \		permit being ap		Property	Run a Business on	Relocate (existing bldg)	Conversion	☐ Addition/Alteration	New Construction	Project (What are you applying for)		ls Property/Lan	s Property/Lan	, Township		' l	Legal Description:	Signification Signification Signification		200	COLKE	ナミ
Other: (explain)	Conditional Use: (explain)	Special Use: (explain)	Accessory Building Addition/Alteration (specify)	Accessory Building (Addition/Alteration (Wobile Home (manufactured date)	Bunkhouse w/ (□ sanitary, or	with Attac	with (2 nd) Deck	with a Deck	with (2) Porch	with a Porch	With Lost	Residence (i.e. cabin, hunting shack, etc.)	Principal Structure (first structure on property)			oplied for is relevant to	- Total Hill Property and Associated Property and Asso	☐ Foundation			☐ 2-Story	ĭ ₹	tion 1-Story	# of Stories and/or basement		☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	D/s Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes—continue—	70 N, Range 9		Gov't Lot Lot(s)	(Use Tax Statement)	plication on behalf of Owner(s))		Š	SCUAL	A
The second secon	in)		dition/Alteration	(specify)	(specify)	ctured date)	ary, <u>or</u> □ sleepii	with Attached Garage	Deck	X	Porch	Ch	The state of the s	unting shack, e	rst structure on	Propos		it) Length:	- Parket	ion	ment	nt			☐ Se			ake, Pond or Flowage If yescontinue	ver, Stream (incl.	w	1	CSM	PIN: (23 digits)	Agent Phone:	Contractor Phone	HONT	City/State/Zip:	- E 70
	in Africano	111 E1000000000000000000000000000000000	on (specity)				sleeping quarters, or				The state of the s			etc.)	property)	Proposed Structure		후 큐 [Year Round	Seasonal	Use		\	ļ ·	Dulu	Town of:	/ol &	2-48-			iù)	· 久生
	William Towns of the Control of the					TOTAL BANKS							A Compt Hayers	- monthfull			* \$2				None	***************************************	3	□ 2	□ 1	# of bedrooms		Distance Struct	Distance Structure 今70	4		<u>\$</u>	-21- 60	nt Walling Addre	CAN	m	· 3	とること
Mercan	The second secon		44,144	114444		mulitarian y and a second	☐ cooking & food prep facilities)	- month of the second of the s			- Control of the Cont			421	ļ		तै,	Width:	None		- 1	□ Privy (Pit) or	Sanitary (Exists) Specify Type:	☑ (New) Sanitary	□ Municipal/City	Sew Is		Distance Structure is from Shoreline:	ture is from Shoreline :				-1 01-000	ess (include City):	CAN Polloski	24842	danie 1 ,	2 文: ()
-	_		,	1	-	-	(35)	-	5		-		- اب اب وبد	121 4 14 14 24			C	47KG 18		ollet	/service c	or _ Va	(ists) Spe	ı	: 1	What Type of wer/Sanitary Sy:		reline : feet	eline :		Lot Size		· \	state/zip);	77		2010	<u> </u>
×	×	×	>	× ×	: ×	: ×	×	×	S X X	1	< >	~ >	 	× ′×		Dimensions	Talya Daya	Height:			ontract)	Vaulted (min 200 gallon)	ecify Type:	cify Type:		What Type of Sewer/Sanitary System Is on the property?		☐ Yes	Is Property in Floodplain Zone?			ion:	d Document:		. 7.	2-2		1860年
~	_	_		- -	_	-	. -	<u> </u>	_ - 	-	-	-	1	- - -	<u> </u>	5	EKTOL.	1				200 gallo	-	M. P				ο ' 8'	rty in 1 Zone?	64	Acreage		(i.e. Propert) Page(s)	Attached	7/5-370	107-S	Cell Phone:	73
					***************************************				7/50 N	1			270年		77%	Footage	Square	635				n)	<u> </u>	Specify Type: Holding Fine Well	□ City	Water		□ Yes	Are Wetlands Present?		no	***************************************	Volume 1016 Page(s) 168	written Authorization Attached Yes No	15-373-4/5	107-818-009) !! }	7/5-372-8/10

Owner(s): Deed All Owners must sign or letter(s) of authorization must accompany this application)

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property when y reasonable traffic or inspection. 9 2012

Authorized Agent:

Rec'd for Issuance? Box 841, From River, Address to send permit 70 Box

If you recent application)

Date

Date

Attach

Copy of Tax Statement

rdly purchased the property send your Recorded Deed

Socretarial Staff 106 17 30A

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

fridavit: Hold For Fees:	THE 2-10(2+ unid for Affidavit-	Signature of Inspector:
	HOW TO THE SHIP & CHROCOLON	LONG CHINCHO BY KIN
00C 01J		Date of Inspection: Condition(s): Town, Committee of A. 1915
Lakes Classification (Date of Re-laspaction).	CONTRACTOR OF THE C	STREAM STATE THE 1990
Mas Fighers Source of District (F-1	a Delineated & Yes I No I NO THE CONTROL OF THE CON	Was Proposed Building Site Delineated Inspection Record: Was 90 Struck
{	Case #:	□ Yes KNo Was Parcel Lego
Variance (B.O.A.) Case #:	ing 🗆 Yes	Is Structure Non-Conforming Granted by Variance (B.O.A.)
O O	☐ Yes (Deed of Record) ☐ Yes (Fixed/Continuous Lot(s))	Is Parcel a Sub-Standard
	Reason for D	Permit Denied (Date):
(15 # of bedrooms: Sapitary bate:	County Use Only) Sanitary Number: 12	Issuance Information (County Use Only)
< 00	NATK Proposed Location(3) or 1868 colleges worker Proposed Location(3) or 1869 (1) Year footstruction Of New One & Two Family Dwelling: & The local Town, Village, City, State	(9) Stake or I N For The C
Prior to the placement or constitution of a succurre river with the proposed site of the prop	ther previously surveyed corner, or verifiable by the Department by where the previously surveyed corner, or verifiable by the Department by where sexpense.	r to the placement or construction or previously surveyed corner to the ot ked by a licensed surveyor at the ow
must be	Det Datuk. (U. T. I NY (F. U. CADIA). Composition (10) feet of the minimum required setback, Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, other previously surveyed corner or marked by a licensed surveyor at the owner's expense, other previously surveyed corner or marked by a licensed surveyor at the owner's expense.	r to the placement or construction or previously surveyed corner or man
	Composting) Feet	back to Septic Tank or Hoback to Drain Field
\$5	رهای	back from the East Lot Lir
Setback from Wetland Setback from 20% Slope Area Feet Elevation of Floodplain		Setback from the West Lot Line
	<u>></u> ++	back from the North ot
Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the River, Stream, Creek Feet	Centerline of Platted Road \$30 Feet Established Right-of-Way 390 Feet	Setback from the Centerline Setback from the Establishec
Description	on Measurement	W. S. W.
Changes in plans must be approved by several s	Setbacks: (measured to the closest point)	(8) Setbacks:
c	Please complete (1) - (7) above (prior to continuing)	lease complete (1) - (7)
	CEE Atheries	
,		
c; or (*) Pond		(6) Show any (*): (7) Show any (*):
North (N) on Plot Plan (*) Driveway <u>and</u> (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Wall (NN: (*) Sentic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)		(2) Show / Indicate: (3) Show Location of (*): (4) Show:
·		chaw incation of:

STATEMENT AND FEE TO:

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Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

Permit #: 8-16-10 01-91-8 Squart od 2000 CO

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS

Refund: #10 COM C

Q√s Property/Land within 300 feet of River, Stream (Ind. Intermittent) Creek or Landward side of Floodplain? If yescontinue →	Section 15 , Township 48 N, Range 9 W	$NE_{1/4}$, $NE_{1/4}$ Gov't Lot Lot(s)	Description: (Use Tax Statement)	Cast ochal	nt (Person Signing Application on behalf of Owner(s))	9	Muskea Rd.	Address of Property: City	to the state of th	TYPE OF PERMIT REQUESTED→ ☐ LAND USE ☐ SANITARY	ACCKS are made payable to: Baynetic County Zoning Department. NO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.
tream (ind. Intermittent)	Town of:	CSM Vol & Page	PIN: (23 digits) 04-038-2-48-0	5-372-5556		Contractor Phone: P	Lyon Rower	Po Box S41 City/State/Zip:	Mailing Address:	□ PRIVY	
Distance Structure is from Shoreline :	.	Lot(s) No. Block(s) No.	(23 digits) Recorded O38. 2-48-09-15-101-000-10000 Volume	715,372-5556 PC, Box 841, Iron RIWI	Agent Mailing Address (include City/State/Zip):	Plumber: 10my Polkoski	Iron Rover Wis 54847	Iron Rusy W3 54847	City/State/Zip:	☐ CONDITIONAL USE ☐ SPECIAL USE	HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)
<u> </u>	Lat Size	Subdivision:	Volume KOL	. I	State/Zip):			13 54847			isit our website ww
ls Property in Floodplain Zone?	Acreage 40		Page(s) (50)	□ Yes □ No	Written Au	Plumber Phone:	907-85		Telephone	☐ B.O.A. ☐ OTHER	w.bayfieldcounty
Are Wetlands Present?	o °		Sity Ownership)] No	Written Authorization	7/5-372-4156	0400-658-106	115-373 - 8107 Cell Phone:	Telephone: 907- 智Sみーロみごロ	THER	.org/zoning/asp)

Proposed Construction:	Existing Structur				-	07/00	- V	}		Value at Time of Completion * include donated time & material
uction:	Existing Structure: (If permit being applied for is relevant to it)	Harding and the state of the st		Property	☐ Run a Business on	Relocate (existing bldg)	☐ Conversion	☐ Addition/Alteration	New Construction	Project (What are you applying for)
	or is relevant to it)			☐ Foundation	□ No Basement :	Basement	2-Story	✓ 1-Story + Loft	□ 1-Story	# of Stories and/or basement
Length: 4み	Length:					Lansinished		Z Year Round	☐ Seasonal	Use
ىو					None		3	2	1	# of bedrooms
Width: 46	Width:		□ None	☐ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	☐ Sanitary (Exists) Specify Type:	(New) Sanitary Specify Type: Holding hand Twell	☐ Municipal/City	What Type of Sewer/Sanitary Systen is on the property?
Height:	Height:			The state of the s	ct)	d (min 200 gallon)	ype:	ype: Holding link	A CONTRACTOR OF THE PROPERTY O	f ystem rty?
								-Well	Сіту	Water

Shoreland

 $\hfill\Box$ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue

Distance Structure is from Shoreline:

Are Wetlands
Present?
□ Yes
□ Mo

Leaf's Property/Land within 300 feet of River, Stream (incl. Intermittent)
Creek or Landward side of Floodplain?

If yes—continue →

☐ Non-Shoreland

	(x	Conditional Ose: (explain)	
79			
	~ ×	Special Use: (explain)	.,,
	- Living	Triple Lapper	
	×	Accessory Building Addition/Alteration (specify)	I
OBE C	0 × × 08)	Accessory Building (specify) Unatteched across 15hop	Municipal Use
•	×	Addition/Alteration (specify)	
,)	×	☐ Mobile Home (manufactured date)	
	×	\square Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	T
	×	with Attached Garage	☐ Commercial Use
	×	with (2 nd) Deck	
<u>~</u>	\(\sigma \)	with a Deck	
1356	OF X OB)	with (2 nd) Porch	
	~ ×	with a Porch	Residential Use
\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	- - - - - - -	with Loft	`
,	~ ~	Residence (i.e. cabin, hunting shack, etc.)	
	×	Principal Structure (first structure on property)	
Square	Dimensions	Proposed Structure	Proposed Use

Owner(s): Use I table 1.

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application) FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable me for the payfose of inspection. Date Crot - 188-5

River とろ

Authorized Agent:

Authorized Ag

Bex 25

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Date

Address to send permit

una manana di salam		Hold For Fees:		Hold For Affidavit:		Hold For TBA:	
	Date of Appgyvak						Signature of Inspector:
		ched.)	\square Yes $ olimits$ Y	'es KNo-(If N	4.5	soard Condition	Condition(s): Town, Committee or Board Conditions Attached?
ion:	Date of Re-Inspection:			d by: 2	Inspect		spection:
N T		anger by onger	727	17 HELD 19	100位		Inspection Record: HE10540
	er Aves	per nte	Were Property Line		No No	eated Xyes □ No	Was Parcel Legally Created Was Proposed Building Site Delineated
	Case #:	(B.O.A.)	Previously Granted by Variance □ Yes KNo			Case #:	Granted by Variance (B.O.A.)
□ Yes XNo	Affidavit Required Affidavit Attached	□ Yes KNo	Mitigation Required Mitigation Attached	X □ X No	(Deed of Record)(Fused/Contiguous Lot(s))	Yes (Deed of Yes (Fused/	ıb-Standard non Owners on-Conform
			o-10	ate: 8.76	Permit Date:		Permit #: 19-0896
	Sanitary Date:	# of bedrooms:		Sanitary Number: Reason for Denial:		ty Use Only)	Issuance Information (County Use Only) Permit Denied (Date):
Well (W).	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.), Septic Tank (ST), Dra n the Date of Issuance i Municipalities Are Requ Federal agencies may a	v Construction ne (1) Year from Dwelling: ALL s, City, State or I	cation(s) of Never Permits Expire O The & Two Family coal Town, Village	take or Mark Proposed Locati NOTICE: All Land Use Per For The Construction Of New One The local	(9) Stake or Mark NOTIC For The Constr
usly surveyed corner to the red must be visible from structure, or must be	st be visible from one previously the setback must be measured i t of the proposed site of the struc	setback must be measured must be k, the boundary line from which the a known corner within 500 feet of the	e obundary line from which the setback the minimum required setback, the bo se of a corrected compass from a know	required settback, the . thirty (30) feet from e Department by use	at the owner's expense at the owner's expense (10) feet but less than rner, or verifiable by th	a licensed surveyor: a licensed surveyor: citure more than ten eviously surveyed coi	nor to the placement of construction of a structure within ten (LU) feet of the inhimum required setages, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the placement of construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.
30		house		Feet		osting)	Setback to Privy (Portable, Composting)
OO Feet		to septic	Setback to Well		30	Tank	Setback to Septic Tank or Holding Tank
30 Feet		% Slope Area dplain	Setback from 20% Slope Area Elevation of Floodplain				Setback from the West Lot Line Setback from the East Lot Line
Feet		tland	Setback from We	Feet	8%		Setback from the North Lot Line Setback from the South Lot Line
330 Feet		1 1	Setback from the River, Stream,	[N	868	ht-of-Way	Setback from the Established Right-of-Way
	mark)	Lake (ordinary high-water	Setback from the Lake (ordinary	20 Feet	ارج	atted Road	Setback from the Centerline of Platted Road
Measurement	М	Description		Measurement	Measu		Description
ıg & Zoning Dep	Changes in plans must be approved by the Planning & Zoning Dept.	inges in plans must be a	Cha		closest point)	asured to the	(8) Setbacks: (measured to the closest point)
				***************************************	ntinuing)	γe (prior to co.	Please complete (1) (7) above (prior to continuing)
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						Č.	See attacked
)	nd/or (*) Privy (P)	(*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	ad (Name Frontage Roperty (*) Drain Field (DF); (isek; or (*) Pond :0%	Frontage Roa es on your Pro otic Tank (ST); *) Stream/Cre Slopes over 24	(*) Driveway and (*) Frontage Road (Na All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Dr (*) Lake; (*) River; (*) Stream/Creek; or (*) Wetlands; or (*) Slopes over 20%		(3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*):
		=	North (N) on Plot Plan	an an	th (N) on Plot Pl		(2) Show / Indicate